PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

10/21/2005 PRICE HENEVELD COOPER DEWITT & LITTON, LI

000277

01/2

7590

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

PRICE HENEVE									
695 KENMOOR, S P O BOX 2567	/() .	1200	States Postal Service	with sufficient postage for f	first class mail in a	an envelope		
GRAND RAPIDS, MI 49501		/		% ∖	transmitted to the US	PTO (571) 273-2885, on the	date indicated be	low.	
3/2006 EHAILE2 00000039 10625327		(.J,	AN 2 0 200	(بير 16	Catherine	M. Updegraff	(Dep	positor's name)	
C:2501	700.00 OP	\ <u>R</u>		P OFFICE OF	athere	ne 97). Upale	make	(Signature)	
C:1504 C:8001	300.00 OP 15.00 OP	(A)	e	**	01.17.	06	ω	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED		INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATI	ION NO.	
10/625,327	07/23/2003	<u> </u>		W. Cleary		COR21 P-304	1	7765	
·		DEDMAI/DEDM	•	-	OSAL WILLOCAL F		,,,,,		
TITLE OF INVENTION: ULTRA THIN FILM TRANSDERMAL/DERMAL OR TRANSMUCOSAL/MUCOSAL DELIVERY SYSTEM									
						•	•		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE		TOTAL FEE(S) DUE DATE DUE		UE	
i	YES		\$700		\$300	\$1000		01/23/2006	
nonprovisional	nonprovisional YES \$7				3300	3 1000	01723720	300	
EXAMINER .		ART UNIT		CLASS-SUBCLASS					
LEWIS, KIM M		3743		602-048000					
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list									
CFR 1.363).	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,								
4.11 7 DTO//DD/1999							<u> </u>		
"Fee Address" indicat PTO/SB/47; Rev 03-02 of	ation form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3							
Number is required.	listed, no name will be printed.								
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE			B) RESIDENCE: (CITY and STATE OR COUNTRY)						
, ,									
Corium Corporation			Grand Rapids, Michigan						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government									
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):									
Issue Fee			A check in the amount of the fee(s) is enclosed.						
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies5			\square The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $16-2463$ (enclose an extra copy of this form).						
5. Change in Entity Status	(from status indicated above								
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.				□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	ublication Fee (if required) v	vill not be accepte	d from anyone			sly paid issue fee to the appli gistered attorney or agent; or			
Authorized Signature Will Raiptery Date 1/13/06									
Typed or printed name	Registration No. 41 883								
This collection of informatic an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandra, Virg Alexandria, Virginia 22313-	for reducing this burden, slinia 22313-1450. DO NOT	11. The information 122 and 37 CFR O. Time will vary nould be sent to the SEND FEES OR	on is required to 1.14. This cold depending up to Chief Information COMPLETED	to obtain lection i oon the i nation O FORM	or retain a benefit by s estimated to take 12 ndividual case. Any fficer, U.S. Patent an S TO THIS ADDRE	y the public which is to file (a 2 minutes to complete, include comments on the amount of d Trademark Office, U.S. Do SS. SEND TO: Commissioned	and by the USPTO ling gathering, pre- time you require epartment of Com- er for Patents, P.O	to process) paring, and to complete merce, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.